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HOUSE BILL 2280 By Kisber

AN ACT to amend Tennessee Code Annotated, Title 68, Chapter 11; Title 71, Chapter 1 and Title 71, Chapter 5, relative to dental care provided to medicaid eligible individuals confined to long-term care facilities.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 71, Chapter 5, Part 1, is amended by adding the following language as a new section:

Section 71-5-140. (a) In addition to the deductions from the total income available for the cost of long-term nursing home care authorized pursuant to the rules and regulations of the department of human services, division of medical services, for an eligible individual confined to a long-term care facility, a deduction shall also be authorized and made from such total income available for the monthly costs for dental service plans for on-site dental services, paid by the eligible individual.

(b) Deductions for such dental services shall only be made for those services and in such amounts as determined by the department and promulgated by rule, whether such services are provided at a dental office, on-site at the long-term care facility, or through contractual arrangement between the long-term care facility and a mobile dental services provider.

- (c) A mobile dental services provider authorized to provide such dental services shall meet and comply with the following requirements:
 - (1) The mobile dental services provider must be a not-for-profit, 501(c)(3) corporation, contracting with licensed dentists pursuant to §63-5-121 to provide dental services.
 - (2) The mobile dental services provider shall obtain a consent for dental services from the resident's responsible party, which consent shall remain valid and in force for the entire length of stay of the resident unless otherwise revoked by the responsible party.
 - (3) The mobile dental services provider shall submit a request for deduction under this section directly to the respective office of the department of human services, which office shall process the request within thirty (30) days of receiving the claim. Such office shall report the approval or disapproval of such deduction directly to the dental services provider, with notification to the responsible party and the long-term care facility of such action.
 - (4) If within thirty (30) days of receiving notification from the department of human services that a resident requires dental care, the responsible party has not signed the consent required pursuant to subdivision (2), nor notified the long-term care facility of an arrangement for alternative dental care, then the long-term care facility shall be authorized to sign such consent on behalf of the resident for the immediate dental care required.
 - (5) The mobile dental services provider shall not be required to bill the responsible party, but shall be paid from the resident's financial resources received by the long-term care facility from the responsible party or otherwise held in the patient's trust account. The long-term care facility shall pay the dental

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services provider within fifteen (15) days of receiving notification of approval of the deduction by the department of human services.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring

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